APPLICATION DATA SHEET FORM

Inventor Information

Inventor One Given Name:: Abraham R.

Family Name:: McAllister

Name Suffix::

Postal Address Line One:: 294 Sidney Street

Postal Address Line Two::

City:: Cambridge State or Province:: MA

Country:: United States of America

Postal or Zip Code:: 02139 City of Residence:: Cambridge State or Province of Residence:: MA

Country of Residence:: Untied States of America Citizenship Country:: United States of America

Inventor One Given Name:: Michael A.

Family Name:: Butler

Name Suffix::

Postal Address Line One:: 4 Napier Road

Postal Address Line Two::

City:: Andover

State or Province:: MA

Country:: United States of America

Postal or Zip Code:: 01810 City of Residence:: Andover

State or Province of Residence:: MA

Country of Residence:: United States of America Citizenship Country:: United States of America

Inventor One Given Name:: Stephen D.

Family Name:: Senturia

Name Suffix::

Postal Address Line One:: 98 Crowinshield Road

Postal Address Line Two::

City:: Brookline

State or Province:: MA

Country:: United States of America

Postal or Zip Code:: 02446 City of Residence:: Brookline

State or Province of Residence:: MA

Country of Residence:: United States of America Citizenship Country:: United States of America

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Application Data Sheet Form

Correspondence Information

Name Line One::

Jeffrey B. Powers

Name Line Two::

Lowrie, Lando & Anastasi, LLP

Address Line One:

One Main Street

City::

Cambridge

State or Province::

MA U.S.A.

Country::

02142

Postal or Zip Code:: Telephone One::

Telephone Two::

(617) 395-7000

Fax Number:

(617) 395-7070

Electronic Mail::

Application Information

Title Line One::

METHODS AND APPARATUS FOR

MONITORING

THE STRENGTH OF CARRIERS IN AN OPTICAL

COMMUNICATION SYSTEM

Total Drawing Sheets::

9 pp. No

Formal Drawings?::

Claims:: Application Type:: 34 Utility

Docket Number::

P0743.70005

Representative Information

Representative Customer Number::

Assignee Information:

Assignee name:: Polychromix, Inc.

Street of mailing address:: 10 State Street

City of mailing address:: Woburn

State or Province of mailing address:: MA Postal or Zip Code of mailing address:: 01801